



APHIA II Operations Research

Objective

APHIA II Operations Research (OR) Project is a three-year cooperative agreement between USAID/Kenya and Population Council. The project generates research evidence which guides other USAID-funded programs and the Government of Kenya in developing initiatives that are responsive to the needs of the Kenyan people.

Project Status

APHIA II OR Project is currently implementing its 3 Year work-plan (October 24, 2010 – October 23, 2013).

Key Activities

APHIA II OR Project's work is organized around seven thematic areas:

- Alcohol and substance abuse, and HIV risk
- Pediatric HIV and AIDS care
- Strengthening clinic systems
- Community services - testing approaches to strengthen services at the community level
- Meeting the reproductive Health (RH) needs of adolescents, including married adolescents and adolescents living with HIV
- Gender and RH and HIV: addressing female genital cutting; and strengthening capacity of services that address intimate partner violence

Achievements to date

Through its research, APHIA II OR Project has brought attention to some critical issues previously ignored in programming. Some recent findings from the project's activities show that:

- VCT service providers can successfully integrate alcohol risk screening, counseling and referrals into their services; over 90% of clients seen by VCT counselors in 15 facilities were screened for alcohol abuse risk.
- Counseling VCT clients on risks associated with drinking leads to a decrease in alcohol use.

- Only 47% respondents in a study in Nyanza knew that a child could acquire infection from its HIV+ mother; even fewer (23%) knew HIV infection could be acquired through breastfeeding, and during birth (13%).
- Having a dedicated intervention to promote HIV testing for children and infants and to educate the community increases the number of HIV-exposed children put on treatment.
- When post-natal care PNC service providers were trained and given a job aid for screening clients for TB, the proportion of clients who were screened for at least one of the five key symptoms of TB increased to 66% from only 4% at baseline.
- Using community health workers to provide individual counseling to people living with HIV/AIDS (PLHWAs) can lead to significant reduction in multiple sexual partners – in a study, the proportion of PLHWAs reporting more than two sexual partners reduced from 41% to 19% after counseling and follow-ups by CHWs.

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UPDATED: February 2012